

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

## Substitute Declaration for Patent Application

As a named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated next to my name;

I believe I am the original, first and sole inventor (if only one name is listed) or an original, first and joint inventor (if plural names are listed in the signatory page(s) commencing at page 3 hereof) of the subject matter which is claimed and for which a patent is sought on the invention entitled

### Non Self-Inactivating, Expression Targeted Retroviral Vectors

the specification of which (check one)

[ ] is attached hereto.

[X] was filed on February 28, 1997 as United States Application

Number or PCT International Application No. 08/808,827

and was amended on \_\_\_\_\_ (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is known by me to be material to patentability as defined in 37 C.F.R. §1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed:

<u>Prior Foreign Application(s)</u>			<u>Priority Not Claimed</u>	<u>Certified Copy Filed?</u>	
				YES	NO
<u>1017/94</u>	<u>Danish</u>	<u>02-SEP-1994</u>	[ ]	[ ]	[ ]
(Number)	(Country)	(Day/Month/Year filed)			
<u>                    </u>	<u>                    </u>	<u>                    </u>	[ ]	[ ]	[ ]
(Number)	(Country)	(Day/Month/Year filed)			
<u>                    </u>	<u>                    </u>	<u>                    </u>	[ ]	[ ]	[ ]
(Number)	(Country)	(Day/Month/Year filed)			

**I hereby claim the benefit under 35 U.S.C. §119(e) of any United States provisional application(s) listed below.**

(Application Number)

(Filing Date)

(Application Number)

(Filing Date)

Post Office Address Same as above



Full name of second joint

inventor, if any Robert Michael Saller

Inventor's Signature [Signature]

Date 08.13.2000

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Full name of third joint

inventor, if any \_\_\_\_\_

Inventor's Signature \_\_\_\_\_

Date \_\_\_\_\_

Residence \_\_\_\_\_

Citizenship \_\_\_\_\_

Post Office Address \_\_\_\_\_

Full name of fourth joint

inventor, if any \_\_\_\_\_

Inventor's Signature \_\_\_\_\_

Date \_\_\_\_\_

Residence \_\_\_\_\_

Citizenship \_\_\_\_\_

Post Office Address \_\_\_\_\_

Full name of fifth joint

inventor, if any \_\_\_\_\_

Inventor's Signature \_\_\_\_\_

Date \_\_\_\_\_

Residence \_\_\_\_\_

Citizenship \_\_\_\_\_

Post Office Address \_\_\_\_\_